

BEST AVAILABLE COPY

Surler
9/23/14

10/020153

Serial #

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TSS QAS REVIEW SHEET ver. 3

Issue Processing

Do I have, identify and/or describe with the following?
<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

JACKET / ISSUE CLASSIFICATION SHEET

Primary Examiner box complete	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Issuing Classification complete	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

PTO-892/1449

Examiner's initials or cross-through lines supplied for each item cited by applicant	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Date(s) supplied/complete on all PTO-1449/892 sheets (Month and year required)	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Brief description of drawings includes description of each figure in drawings	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Continuing data mentioned in 1st paragraph (can be an insert)	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

CLAIMS

Claims listed on Notice of Allowability match allowed claims and/or index of claims	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Claims correctly numbered in index. (No duplicate or missing claim numbers. And no incorrect dependencies)	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
One sheet of complete claims	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

RAM FEES

	Amount Actually Charged	Amount that Should Have Been Charged
<input type="checkbox"/> Examiner's amendment Check box if applicable		

CRFE-COMPUTER-READABLE FORM

If necessary (biological sequence listing)	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> N/A
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NOTICE OF ALLOWABILITY

If drawing is present, either Box No. 3 (drawings accepted) or Box No. 6 (corrected drawing request) has been checked	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
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INITIALED BIB SHEET

Initialed Bib sheet is present	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
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REVIEWER COMMENTS

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